



### Part 1: Local Educational Agency Information

<b>Name of Local Educational Agency</b>	<b>Name of LEA Executive Director (Public Charter Schools Only)</b>
Meridian Public Charter School	Dr. Ronald G. Ridker
<b>Full Address of Local Educational Agency</b>	<b>Email Address of LEA Executive Director (Public Charter Schools Only)</b>
2120 13th Street, NW Washington, DC 20009	<a href="mailto:rridker@comcast.net">rridker@comcast.net</a>
<b>Main Telephone Number of Local Educational Agency</b>	<b>Telephone Number of LEA Executive Director (Public Charter Schools Only)</b>
(202) 387-9830	(202) 387-9830
<b>Name of Primary LEA Contact for Title I LEA Plan</b>	<b>Name of Additional LEA Contact for Title I LEA Plan</b>
Dr. Robinette Breedlove	Darryl Reed
<b>Position Title of Primary LEA Contact for Title I LEA Plan</b>	<b>Position Title of Additional LEA Contact for Title I LEA Plan</b>
Principal	Director of Special Programs
<b>Email Address of Primary LEA Contact for Title I LEA Plan</b>	<b>Email Address of Additional LEA Contact for Title I LEA Plan</b>
<a href="mailto:rbreedlove@meridian-dc.org">rbreedlove@meridian-dc.org</a>	<a href="mailto:dreed@meridian-dc.org">dreed@meridian-dc.org</a>
<b>Telephone Number of Primary LEA Contact for Title I LEA Plan</b>	<b>Telephone Number of Additional LEA Contact for Title I LEA Plan</b>
(202) 387-9830 x104	(202) 387-9830 x292

### Part 2: LEA Certification

I certify that all of the information contained in this application is true and accurate to the best of my knowledge.  
Additionally, I certify that the LEA agrees to all assurances included in the application.  
I have been authorized to file this application on behalf of the agency named above.

<b>Name of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only)</b>	<b>Signature of Individual Certifying Title I LEA Plan</b>
Dr. Ronald G. Ridker	<i>Ronald G. Ridker</i>
<b>Title of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only)</b>	<b>Date of Certification (input at the time of signature)</b>
Board Chair	10/2/2012

**SUBMIT BOTH A MICROSOFT EXCEL VERSION OF THIS FULL WORKBOOK AND A SIGNED, SCANNED COPY OF THIS PAGE BY EMAIL TO [CON.APP@DC.GOV](mailto:CON.APP@DC.GOV).**

### OSSE Use Only

Date Title I LEA Plan First Received: